

Desired Outcomes of ACC Phase II

The Accountable Care Collaborative (ACC) is an outcomes-driven program. Outcomes for the next phase of the ACC, like those in the current phase of the program, are built on the Triple Aim – improved experience, improved care, and lower costs. Outcomes are aligned with the **Governor's State of Health**, the **Colorado State Innovation Model**, and the **Institute of Medicine's Core Measure Set**.

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ACC Phase II Outcome	ACC Phase II Outcome Area	IOM Core Measure Focus	IOM Best Current Measure	Colorado SIM Quality Measures	ACC Phase II Measure Focus Examples	ACC Phase II Measures
Improved Health	Health management	Wellbeing	Self-reported health		Self-reported well-being, education level, employment, housing status, household income.	TBD
				Use of appropriate medications for asthma, comprehensive diabetes care, diabetes blood pressure management, LDL management and control, blood pressure	Chronic condition management, rate of hospitalizations for chronic disease.	TBD
		Care access	Unmet care need		Access to care	TBD
		Patient safety	Hospital acquired infection rate	Screening for future fall risk	Medical error rate	TBD
	Population health	Life expectancy	Life expectancy at birth		Life expectancy	TBD
		Overweight and obesity	Body mass index	Body mass index (BMI) screening and follow-up, weight assessment and counseling for nutrition and physical activity for children	Rate of obesity, physical activity.	TBD
		Addictive behavior	Addiction death rate	Tobacco use assessment and tobacco cessation intervention, substance abuse disorder screening	Rate of substance abuse, rate of tobacco use.	TBD
		Unintended pregnancy	Teen pregnancy rate		Unintended pregnancy rate.	TBD
	Social well-being	Healthy communities	High school graduation rate		Education level attained.	TBD
		Community engagement	Social support		Network of social supports.	TBD
More Value	Evidence-based cost efficiency	Evidence-based care	Preventable hospitalization rate		Potentially-preventable events, ER utilization, readmissions, the percentage growth in value-based purchasing methods.	TBD
	Goals by population and service	Preventative services	Childhood immunization rate	Influenza immunization, screenings for breast cancer, colorectal cancer, general anxiety disorder, maternal depression, clinical depression and follow-up plan, and developmental screening.	Immunization rate, screening composite measures, well-child visits, utilization of maintenance medications.	TBD
		Population spending burden	Per capita health care expenditure		Value goals by population and by service.	TBD
		Personal Spending Burden	High spending relative to income			TBD
Better Experience	Client engagement	Care match with patient goals	Patient-clinician communication satisfaction		Are clients achieving their goals?	TBD
		Individual engagement	Health literacy rate		Level of empowerment, activation, and health literacy.	TBD
	Systems efficiency				Number of touch points required to achieve intended outcome.	TBD

Improved Health

- A strong focus on proactively improving the health of Medicaid clients
- Measuring how well clients are able to manage their health and chronic conditions
- Begin to examine social well-being indicators to measure the ACC's progress

More Value

- Value is health outcomes and client experience achieved per dollar spent.
- Shift the proportion of expenditures towards the setting that produces the best value, given the client's acuity or need
 - Identify value goals for specific populations and services

Better Experience

- Focus on client engagement, involving both experience and activation
- Measure systems efficiency - those that minimize difficulties for clients and allow each provider to make the maximum contributions to care